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08/22/2005 NNGUYEN2 00		873		transmitted to the	e USPTO	(703) 746-4	4000, on the	date indicated below.
01 FC:1501 1400.	.00 DA							(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED I	IED INVENTOR ATTORNEY DOCKET N			OCKET NO.	CONFIRMATION NO.
09/920,873	08/02/2001		Yorishige	: Ishii		70801-:	56345	5108
TITLE OF INVENTION: O	PTICAL COMMUNICATION	ON MODULE	_					
12								
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE		TOTAL FE	E(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300			09/02/2005	
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EXAM		ART UN	II I	CLASS-SUBCLASS				
DOAN, JE	ENNIFER	2874		385-088000				
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Change of correspond	ence address (or Change of	Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Peter J. Manus					
Address form PTO/SB/122) attached. (2) the n			(2) the name	of a single firm (having as a member a comey or agent) and the names of up to				
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Sharp Kabushil	ki Kaisha		Osaka,	Japan				
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the nate	ent) 🔲 Individual	KI Corno	ration or of	ther private of	roun entity Government
4a. The following fee(s) are			. Payment of Fe		Согро		arer private 6	oup chiny — dovernment
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	MALL ENTITY status. See	•	☐ b. Applican	nt is no longer claiming	SMALL I	ENTITY sta	atus. See 37 C	CFR 1.27(g)(2).
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Authorized Signature	- May VI	WYVV		Date _	,,,,,,,,	05 -		
Typed or printed name	Peter J. Ma	nus		Regist	ration No.	26,76	00	
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an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virginal Alexandria, Virginia 22313-	plication form to the USPT for reducing this burden, sh nia 22313-1450. DO NOT 1	O. Time will vary ould be sent to the SEND FEES OR C	depending upon Chief Information COMPLETED F	n the individual case. A tion Officer, U.S. Paten FORMS TO THIS ADD	Any comm t and Trac ORESS. SI	ents on the demark Off END TO: C	e amount of the amount of the commissioner	me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,

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PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE rk Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. FIRADEN Complete if Known Effective on 12/08/2004. 09/920,873-Conf. #5108 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number TRANSMITTAL Filing Date August 2, 2001 Yorishige Ishii First Named Inventor For FY 2005 J. Doan **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 2874 Art Unit 56345(70801) **TOTAL AMOUNT OF PAYMENT** 1,730.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name Edwards & Angell, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity **Small Entity Application Type** Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) <u>Fee (\$)</u> Fee (\$) Fee (\$) 300 200 Utility 150 500 250 100 Design 200 100 100 50 130 65 200 100 300 150 160 80 Plant 300 150 500 250 600 300 Reissue Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Multiple Dependent Claims Total Claims** Fee Paid (\$) Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Indep. Claims **Extra Claims** 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1501 Utility issue fee 1504 Publication fee for early, voluntary, or normal 8001 Printed copy of patent w/o color					1,400.00 300.00 30.00		
SUBMITTED BY	1//, 1					· -	=
Signature	Titer	Manus	Registration No. (Attorney/Agent)	26,766	Telephone	(617) 439-4444	_
Name (Print/Type)	Peter J. Manus	· -			Date	August 18, 2005	

Number of each additional 50 or fraction thereof

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Application No. (if known): 09/920,873

Attorney Docket No.: 56345(70801)

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